# Form **8871**(July 2000)

### Political Organization Notice of Section 527 Status

OMB No. 1545-1693

OGDEN, UT

Department of the Treasury Internal Revenue Service Part I General Information Name of organization Employer identification number AFSCME DISTRICT COUNCIL NO. 36 PAC 95 4822384 Mailing address (P.O. Box or number, street, and room or suite number) 234 S. LOMA City or town, state, and ZIP code LOS ANGELES, CA 90026 E-mail address of organizatio CAROL@AFSCME36.ORG 4a Name of custodian of records 4b Custodian's address 234 S. LOMA CAROL WHEELER LOS ANGELES, CA 90026 5a Name of contact person 5b Contact person's address 234 S. LOMA CAROL WHEELER LOS ANGELES, CA 90026 6 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number City or town, state, and ZIP code Part II Purpose Describe the purpose of the organization TO SUPPORT STATE AND LOCAL CANDIDATES WHICH FURTHER THE GOALS OF THE ORGANIZATION Part III List of All Related Entities (see instructions) 8a Name of related entity 8b Relationship 8c Address AFSCME DISTRICT COUNCIL 234 S. LOMA **K).** 36 **CONNECTED** LOS ANGELES, CA 90026 RECEIVED OCT 0.3 2000 (7 For Paperwork Reduction Act Notice, see page 4. Cat. No. 30405V

V List of All Office	9b Title	nly Compensated Employees (see instructions)  9c Address
	<b>02</b> 110	Jo Address
A		
		***************************************
		***************************************
<del></del>		
Under penalties of perior	ry. I declare that the organization	named in Part I is to be treated as an organization described in the second
nevenue code, and that	mave examined this notice, inclu-	named in Part I is to be treated as an organization described in section 527 of the Interni ding accompanying schedules and statements, and to the best of my knowledge and belie
it is true, correct, and co	emplete,	
(A)		1
n Signature of auth	el Jelies	9/28/2000
Signature of auth		

Printed on recycled paper

Form **8871** (7-2000)



### File Political Organization Notice of Section 527

[ Click for Text Only Version ]

Please review our Security and Privacy Policy

Enter information below to fulfill requirements for electronic filing of Form 8871:

Employer Identification Number:	954822384
Name of Organization:	AFSCME DISTRICT COUNCIL NO. 36 PAC
Street Address:	234 S. LOMA
City:	LOS ANGELES
State:	California
Zip Code:	90026-
Email address of Organization:	CAROL@AFSCME36.ORG
Name of Custodian of Records:	CAROL WHEELER
Name of Contact Person:	CAROL WHEELER

File Electronically

Clear Form

Tax Stats | Tax Info For You | Tax Info For Business
Electronic Services | Taxpayer Help & Ed | Tax Regs In English
IRS Newsstand | Forms & Pubs | What's Hot | Meet The Commissioner
Comments & Help | How to Contact Us | Site Tree | IRS Jobs











briday, 04-Sep-2000 10;33:08 EDT



# File Political Organization Notice of Section 527 Results

#### Thank you for submitting Form 8871

The following information was successfully transmitted:

EIN: 954822384

Organization Name: AFSCME DISTRICT COUNCIL NO. 36 PAC

Street Address: 234 S. LOMA
City: LOS ANGELES

State: CA Zip Code: 90026

Email Address: CAROL@AFSCME36.ORG

Custodian of Records: CAROL WHEELER Contact Person: CAROL WHEELER

Tax Stats | Tax Info For You | Tax Info For Business
Electronic Services | Taxpayer Help & Ed | Tax Regs In English
IRS Newsstand | Forms & Pubs | What's Hot | Meet The Commissioner
Comments & Help | How to Contact Us | Site Tree | IRS Jobs











1 of 1